|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 2025 PACIF Grant Application *A program exclusively for VLCT PACIF Members* | | **VLCT USE ONLY** | | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Received \_\_\_\_\_\_\_\_\_Open Recs | | | | | |
| 500 \_\_\_\_\_\_\_\_\_\_\_\_ Org ID \_\_\_\_\_\_\_\_\_Open High Recs | | | | | |
| $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Max Award \_\_\_\_\_\_\_\_\_Prior Year Status | | | | | |
| \_\_\_\_\_\_\_\_\_% Award | | | | | |
| PACIF Member Name (Municipality): | | | | | | | |
|  | | | | | | | |
| Applicant Name & Title: | | | | | | | |
|  | | | | | | | |
| Primary Phone: | | | | | | | |
|  | | | | | | | |
| Applicant Email Address: | | | | | | | |
|  | | | | | | | |
| Department(s) equipment is intended for: | | | | | | | |
|  | | | | | | | |
| **If you have not read all the rules and guidelines, please do so now. Click** [**here**](https://www.vlct.org/resource/pacif-grants) **to access this document.** | | | | | | | |
| **1.** Specify each of the items requested and the cost for each item or groups of like items. Additional items should be listed separately on the Equipment Itemization Worksheet. Click [**here**](https://www.vlct.org/resource/pacif-grants) to access the worksheet. Be sure to include the cost of installation and/or shipping charges. **Vendor quote(s) and supporting documentation must accompany this application.** | | | | | | | |
| **Item Description** | **Quantity** | | | **Quoted**  **Cost**  **per Item** | **Quoted Shipping Cost** | **Are vendor quotes**  **attached?** | **Quoted**  **Total**  **Cost** |
|  |  | | | $ | $ |  | $ |
|  |  | | | $ | $ |  | $ |
|  |  | | | $ | $ |  | $ |
|  |  | | | $ | $ |  | $ |
|  |  | | | $ | $ |  | $ |
| 2. Combine the *quoted total cost* of all items above and those listed on the itemization worksheet (if used). | | | | | Subtotal | | $ |
| 3. Enter the amount of any external (non-VLCT PACIF) grant funds you have requested or received for the items listed above. Enter "0" if none.  (e.g. funding for body armor through the USDOJ, etc.) | | | | | External Grant Total | | $ |
| 4. Subtract line 3 (External Grant Total) from line 2 (Subtotal). | | | | | **Net Total Cost** | | $ |
| **5**. Why is this equipment needed and how will it reduce the potential for PACIF claims? Attach additional pages if necessary. | | | | | | | |
|  | | | | | | | |
| Applicant Signature: | | | Date: | | | | |
|  | | |  | | | | |
| Senior Municipal Official Signature: | | | Date: | | | | |
|  | | |  | | | | |
| Senior Municipal Official Printed Name: | | | Senior Municipal Official Title: | | | | |
|  | | |  | | | | |
| **Please use the Application Checklist on page 8 of the** [**Rules & Guidelines**](https://www.vlct.org/resource/pacif-grants) **before sending this application.** | | | | | | | |
| **Submit application, vendor quotes, supporting documentation, and questions to VLCT, Attn: Lia Gerrish.**  Email to [lgerrish@vlct.org](mailto:lgerrish@vlct.org); or mail to VLCT, 89 Main Street, Suite 4, Montpelier, VT 05602 | | | | | | | |